



WEST SUSSEX ASSOCIATION FOR THE BLIND

MEMBERSHIP APPLICATION FORM

Thank you for your interest in joining 4SIGHT. Your membership will allow you to access a range of services. To become a member please fill in the form below and return to 4SIGHT with your subscription fee of £20 for 12 months.

Name: _____ Date of Birth: ___ / ___ / ___

Address: _____

Postcode: _____

Telephone: _____ Mobile: _____

Email: _____

I am: Blind Partially Sighted

Registration No: _____ Date Registered: ___ / ___ / ___

Sight Condition:

MD RD DR Cataracts Glaucoma

Other (please state) _____

Please can I receive the Newsletter in the following format:

LARGE PRINT TAPE BRAILLE EMAIL

My Preferred Language is: ENGLISH

Other _____

How did you hear about 4SIGHT? _____

Equality Monitoring:

- | | | | | | |
|-------------------|--------------------------|---------------|--------------------------|-------------|--------------------------|
| White British | <input type="checkbox"/> | Mixed African | <input type="checkbox"/> | Indian | <input type="checkbox"/> |
| White Other | <input type="checkbox"/> | Mixed Asian | <input type="checkbox"/> | Pakistani | <input type="checkbox"/> |
| White Irish | <input type="checkbox"/> | Mixed British | <input type="checkbox"/> | Bangladeshi | <input type="checkbox"/> |
| Mixed Caribbean | <input type="checkbox"/> | Other Mixed | <input type="checkbox"/> | Other Asian | <input type="checkbox"/> |
| Black Caribbean | <input type="checkbox"/> | Black African | <input type="checkbox"/> | Other Black | <input type="checkbox"/> |
| Gypsy / Traveller | <input type="checkbox"/> | Chinese | <input type="checkbox"/> | Other | <input type="checkbox"/> |

Are there any services that we offer that you would like more information on?

I enclose a STANDING ORDER /CHEQUE / POST ORDER / CASH for £20.00.

I agree to my details being held on computer and understand that my details will not be passed onto any third party.

Signed: _____

Date: ___ / ___ / ___

If you have any queries please contact us at:

**4SIGHT (WSAB)
4SIGHT Bradbury Centre
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Bognor Regis,
West Sussex,
PO21 1TE**

Telephone: 01243 828555

Email: enquiries@4sightsussex.co.uk

Web: www.4sightsussex.co.uk

Office Use only:

Membership No:

Joining date: